P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050 ATTORNEY DOCKET NO. 459-324P

PLEASE NOTE: **YOU MUST** COMPLETE THE FOLLOWING:

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I werely believe that I am the original first and sole inventor (if only one inventor is named below) or an original. First and injurious of the original first and sole inventor (if only one inventor is named below) or an original.

	verily believe that I am the original, first a plural inventors are named below) of the	and sole inventor (if only one inv subject matter which is claimed	and for which a patent is sought or	the invention entitled:				
nsert Title: ->	PROCESS FOR PRODUCT			10US				
	ADMINISTRATION AND	OTHER IMMUNOGL	OBULIN PRODUCTS					
Fill in Appropriate	the specification of which is attached her	reto. If not attached hereto,						
Information — For Use	the specification was filed	i on <u>June 9, 1</u>	999	as				
Without	United States Application Number							
Specification	and amended on		(if appl	acable); and/or				
Attached:	the specification was filed or International Application N							
	amended under PCT Article		(if applicable)					
	amended by any amendment referred to	o above.	of the above identified specification					
السال "كود" السال السال السال السال السال السال السال السال السال	I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations,							
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≒ == } == 1	the second or described in any	printed publication in any count	A perote my of one magnitude and a	I Of HIOTE HIAM ONE year prior				
14 11	to this application, that the same was application, that the invention has not	not in public use or on sale in	niect of an inventor's certificate is	sued before the date of this				
1 = 1 =	It in any country foreign to th	e United States of America on a	in application thed by the of the leg	at representatives or assigns				
*-	at the second of	or decione) prior to this applicab	on, and that no application for pater	If Ot illactifor a certificate on				
= = ==	this invention has been filed in any count	try foreign to the United States of	America prior to this application by n	ne or my legal representatives				
=	or assigns, except as follows.	m 1 mail 05 Mailed State	es Code, §119 (a)-(d) of any foreign	n application(s) for patent or				
ij	I hereby claim foreign priority ber inventor's certificate listed below and	have also identified below any	foreign application for patent or in	ventor's certificate having a				
4.4	filing date before that of the application	n on which priority is claimed:						
ļā	Prior Foreign Application(s)			Priority Claimed				
Insert Priority	98201909.3	Europe	6/9/1998					
Information: (if appropriate)	(Number)	(Country)	(Month / Day / Year Filed)	Yes No				
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				— Grand Harring Harris				
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	(Number)	(Country)						
Insert Provisional	I hereby claim the benefit under Title	35, United States Code, §119(e)	of any United States provisional ap	oplication(s) listed below.				
Application(s):	(Application Number)			(Filing Date)				
(II wij)				(Filing Date)				
	(Application Number)							
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the							
	Filing Date of This Application:		Date of	of Filing (Month / Day / Year)				
Tours Barrers	Country Application Number		Number					
Insert Requested Information: (if appropriate)								
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:							
Insert Prior U.S. Application(s):		September 2	8. 1998					
(if any)	60/102,055 (Application Number)	(Filing Date	(Stants — patented, pending, abandoned)					
	(Application Number)	(Filing Dat	z) (Status –	- patented, pending, abandoned)				

I hereby appoint in a strong stop prosecute this application and/or and in application based on this application and to transact all business is the Patent and Trademark Office connected therewith and it connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

Raymond C. Stewart	(Reg. No. 21,066)	Terrell C. Birch	(Reg. No. 19,382) (Reg. No. 28,380) (Reg. No. 29,680) (Reg. No. 28,977) (Reg. No. 32,644)	
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PLEASE NOTE: YOUMUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of First or	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE	0		DATE*		
Sole inventor:			INVENTOR'S SIGNATURE	Laures	en	19/7/49		
Inventor Insert Date This	Inga	LAURSEN	0		CITIZENSHIP			
Document is Signed	1	Residence (City, State & Country)			Danish			
Insert Residence	Hellerup Denmark							
	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)							
insert Post Office	Charlottenlundvej 9, 1.tv., DK-2900 Hellerup Denamrk							
	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE			DATE		
Full Name of Second			13-/21	2		2/2/99		
see above	Børge	TEISNER			CITIZENSHIP			
4	Residence (City, State & Country	Denmar	·k		Danish	n		
	Odense C				<u>.L</u>			
3	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)							
.A	Vestergade 93, 2, DK-5000 Odense C Denmark							
		FAMILY NAME	INVENTOR'S SIGNATURE			DATE* .		
Full Name of Third	GIVEN NAME	(Miller traine						
Inventor, if any see above					CITIZENSHIP			
	Residence (City, State & Country	/)			ļ			
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		FAMILY NAME	INVENTOR'S SIGNATURE		-	DATE*		
Full Name of Fourth	GIVEN NAME	LAMILI MAMIL	1100					
Inventor, if any see above					CITIZENSHIP			
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		5 1 4 D V B14 1 4 5	INVENTOR'S SIGNATURE			DATE		
Full Name of Fifth	GIVEN NAME	FAMILY NAME	Hercieron o ordinarion					
Invensor, if any see above					CITIZENSHIP	-		
•	Residence (City, State & Count	try)						
	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)							
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